			6								_		
			.)					<u> </u>	0	9/	8149	20 m	1
PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number					
	PAIENI			tive October 1, 2000				35. C9574D5					
		CLAIMS A	S FILED (Colum		-	umn 2)	SMA		NTITY	0.5	OTHER		
TOTAL CLAIMS			56			RA			FEE	OR 7	SMALL	FEE	-
FOR				NUMBER FILED		NUMBER EXTRA		C FEE	 		BASIC FEE		1
TOTAL CHARGEABLE CLAIMS			56 minus 20=		. 36		XS	9=		1			
INDEPENDENT CLAIMS			3 minus 3 = *			0		10=	 	OR	Vác	648-	ľ
MULTIPLE DEPENDENT CLAIM P			RESENT				-		-	OR	<u> </u>		ł
* If 1	he difference	e in column 1 is	less than z	ero, ente	r "0" in	column 2		35=		OR		6.2	
\bigcirc		CLAIMS AS					TO	TAL	<u> </u>	OR	i	1358.	ľ
4.	23.04	(Column 1)		(Colur	mn 2)	(Column 3)	SM.	ALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BEA DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	. 9	Minus	5	6	=	X\$	9=		OR	X\$18=		
AME	Independent		Minus	***	3	=	X4	0=		OR	X80=		
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+13	5-			+270=		
							<u> </u>	J_ DTAL		OR	TOTAL		
	<u>~</u>	(Column 1)		(Colur	nn 2)	(Column 3)	ADDIT.	FEE		OR	ADDIT. FEE	-	
NDMENT B		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	P	Minus	••		=	X\$	9=		OR	X\$18=		
5	ndependent	ALTATION OF M	Minus	•••			X40)=		OR	X80=		
	INST PRESE	NTATION OF MI	OLTIPLE DEI	PENDENT	CLAIM		+13	5_		1	+270=		
							TC	TAL		OR OR	TOTAL	•	
		(Column 1)		(Colum	nn 2)	(Column 3)	ADDIT.	FEE L		Un ,	ADDIT. FEE		
יב ו		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDIMEN	otal	*	Minus	••	<u>JN</u>	=	Vec		FEE			FEE	
N L	ndependent		Minus	***		=	X\$ 9	\dashv		OR	X\$18=		
F	IRST PRESE	NTATION OF M	JLTIPLE DEF	LTIPLE DEPENDENT CLAIM			X40=			OR	X80=		
. 16.11	he entry in entre	mn 1 ie laan ihne "	no ontre*		507 ·-		+135	=	į	OR	+270≈		
11 (he "Highest Nur	mn 1 is less than th mber Previously Pa mber Previously Pa	aid For IN THIS	S SPACE is	less than	20 enter "20 "	TO ADDIT, F	TAL		OR A	TOTAL ODIT, FEE		
Th	e "Highest Num	ber Previously Pai	d For" (Total or	Independer	nt) is the	i 3, enter "3." highest number i			opriate box				
												8	